



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2307

|                             |                                       |              |                        |                                   |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER<br>10/822,194 | FILING DATE<br>04/09/2004<br><br>RULE | CLASS<br>700 | GROUP ART UNIT<br>3651 | ATTORNEY DOCKET NO.<br>BRIXIUS-12 |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|

## APPLICANTS

Wolfgang Brixius, Neunkirchen A.Br, GERMANY;

 Dominik Graefer, Dortmund-Wellinghofen, GERMANY;  
 Albrecht Hoene, Lappersdorf, GERMANY;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

GERMANY 103 17 135.5 04/14/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/22/2004

|                                                                                                                                          |                                    |                            |                           |                                |
|------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no                                                     | STATE OR<br><br>COUNTRY<br>GERMANY | SHEETS<br><br>DRAWING<br>1 | TOTAL<br><br>CLAIMS<br>18 | INDEPENDENT<br><br>CLAIMS<br>2 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                    |                            |                           |                                |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____                                                                   |                                    |                            |                           |                                |

## ADDRESS

 020151  
 HENRY M FEIEREISEN, LLC  
 350 FIFTH AVENUE  
 SUITE 4714  
 NEW YORK, NY  
 10118

## TITLE

Transport system for articles, in particular containers for baggage pieces

|                                   |                                                                                                                   |                                                                |
|-----------------------------------|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| FILING FEE<br><br>RECEIVED<br>770 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                   |                                                                                                                   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
|                                   |                                                                                                                   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
|                                   |                                                                                                                   | <input type="checkbox"/> 1.18 Fees ( Issue )                   |
|                                   |                                                                                                                   | <input type="checkbox"/> Other _____                           |
|                                   |                                                                                                                   | <input type="checkbox"/> Credit                                |